California Department of Housing and Community Development

Application Summary State Community Development Block Grant – General Allocation With Focus on Public Works



1.a **Application Information** Applicant Name: Address: State: _____ Zip Code _____ County: Check here if this is a Joint Application and complete a summary page for each applicant. **Authorized Representative Information (per the Resolution)** 1.b First Name: Last Name: ____ Job Title: _____ Check if the address information is the same as above in 1.a, if not fill in information below. Address: City: ___ Zip Code ____ State: Phone: _____ Ext: ____ Fax: _____ Email: _____ Signature:_____ Date: ____ **Applicant Contact Information** 1.c ____ Check if the contact information is the same above in 1.b, if not fill in information below. First Name: _____ Last Name: _____ _____ Job Title: _____ Name of Agency: State: _____ Zip Code _____ Phone: _____ Ext: ____ Fax: ____

2. Requested Funding for All Proposed Activities						
Activity	Amount Requested	Program Operator	Result of CDBG Planning/TA Grant?	Target Population (Enter Codes from Part 5)		
General Administration	\$	Applicant Staff				
		Other Agency				
Public Work Project(s)						
	\$	A 11 O				
	\$	Applicant Staff	Yes			
Activity TOTAL	\$	Other Agency	Grant #			
Housing - New Constructi	on Project(s)					
	\$	A 11				
	\$	Applicant Staff	Yes			
	\$	Other Agency	Grant #			
Activity TOTAL	\$					
Housing – Acquisition Pro	gram					
	\$	Applicant Staff	Yes			
Activity TOTAL	\$	Other Agency	Grant #			
Housing – Acquisition Pro				L		
	\$					
	\$	Applicant Staff	Yes			
	\$	Other Agency	Grant #			
Activity TOTAL	\$	Other Agency	Orant #			
Housing – Rehabilitation - Single Family Program						
	\$	Applicant Staff	Yes			
Activity TOTAL	¢	Other Agency	Grant #			
Housing Rehabilitation – M			Jidne II			
	\$	•				
	\$	Applicant Staff	Yes			
Activity TOTAL	\$	Other Agency	Grant #			
Public Service Program(s)						
	\$	Applicant Staff	Voc			
	\$	Applicant Stan	Yes			
Activity TOTAL	\$	Other Agency	Grant #			
Community Facility Project						
	\$	Applicant Staff	Voc			
	\$	Applicant Staff	Yes			
Activity TOTAL	\$	Other Agency	Grant #			
TOTAL Funding Requested	\$					

3	3. Location of Activities – U.S. Census				
	Name of CDBG Activity	Jurisdiction- wide or Target Area?	Census Tract Numbers and Block Group Numbers (for target area activities only)		
1.	Public Work Project (s)	Jurisdiction Wide			
2.	Housing New Construction Project (s)	Jurisdiction Wide Target Area			
3.	Housing Acquisition Program	Jurisdiction Wide			
4	Housing Acquisition Project	Jurisdiction Wide			
5.	Housing Rehabilitation – Single Family Program	Jurisdiction Wide			
6.	Housing Rehabilitation – Multi Family Project	Jurisdiction Wide			
7.	Community Facility Project	Jurisdiction Wide			
8.	Public Service Program	Jurisdiction Wide			

4. Legislative Representative Information	
_	

	District #	First Name	Last Name
Assembly			
Senate			
Congress			

	District #	First Name	Last Name
Assembly			
Senate			
Congress			

	District #	First Name	Last Name
Assembly			
Senate			
Congress			

5. Target Populations

Physically Disabled Seniors 1. 9. Persons with AIDS 10. Mentally Ill 3. Youths 11. Veterans Single Adults 12. Victims of Domestic Violence 4. Single Men 13. Substance Abusers 5. Single Women 14. Dually-Diagnosed 6. Families 15. Homeless 7. Other: 8. Farmworkers 16.

PART B. – Required Certifications and Documentation

 Resolution of the Governing Body <u>This document is required</u>. See sample in Appendices.
The Resolution submitted with this application must: be an original or an original certified copy of the Resolution; and authorize submission of the application; and approve the application's contents (funding requested, activities, committed leverage, etc.); and authorize its execution (and any amendments thereto); and designate a person authorized to enter into an agreement, if funded. CDBG strongly recommends that applicants use the suggested language in the sample (Appendices).
2. Statement of Assurances. This document is required.
All applicants must use the form provided by the State (See Appendices). Original signature is required from Chief Executive Officer (in blue ink)
3. Hold Out Status
Has the applicant received written hold out letter from the Department?
☐ Yes. If yes, see note below. ☐ No.
Has the applicant received a written hold out waiver letter from the Department?
☐ Yes. ☐ No If no, then applicant is not eligible to submit an application.
4. Housing Element Status. CDBG compliance is required.
The Department will not award funds to any applicant who is not in CDBG compliance with their Housing Element by <u>December 3, 2006</u> . No extensions will be granted beyond that date. Call Paul McDougall at 916-322-7995 to verify status of the housing element.
5. Compliance with OMB Circular A-133.
All applicants must use the form provided in Appendices. Complete form and have signed in blue ink.

PART B. - Required Certifications and Documentation

6. Growth Control. This information is required.			
Has the applicant enacted limitations on residential construction, which limitations are not establishing agricultural preserves, not imposed by another agency, or not based on a health and safety need?			
☐ Yes. If yes, see note below. ☐ No.			
NOTE: If the applicant has a General Plan, ordinance, or other measure which directly limits by number either the building permits which may be issued for residential construction, or buildable lots which may be developed for residential purposes, and the measure does not meet any of the exceptions found in the Program Regulations, Section 7056 (b)(2)(B), check "Yes" and attach a copy of the measure in this section of the application.			
6. Citizen Participation. This information is required.			
The Program's Public Hearings/Citizen Participation requirements are described in the 2003 CDBG Grant Management Manual, Chapter 18. Use this section of the application to make sure you have met these requirements.			
☐ Public hearing was conducted during the program design phase of the application.			
Public hearing was conducted (at least 30 days after program design phase hearing) to approve submittal of the application.			
Public Notices announcing the public hearings were published in a local newspaper and contained the required information, as stated in the 2003 CDBG Grant Management Manual			
☐ Sign-in sheets are available for each public hearing.			
 Did the jurisdiction receive written comments during the public hearings process prior to submitting this application? 			
☐ YES. See note below. ☐ NO			
Note: If a jurisdiction received written comments as part of the public hearings process prior to submitting the CDBG application, a copy of the comments must be submitted with the application. In addition, the jurisdiction's response must also be included. Be sure to make an entry on the Application Checklist.			
7. Joint Powers Agreement. This form <u>may</u> be required.			

An Agreement is required by the CDBG Regulations, Section 7060(c) as part of an application on behalf of another jurisdiction or for joint applications. Applicants must prepare an Agreement if the following conditions exist:

• if one application is submitted by two or more jurisdictions, or

PART B. – Required Certifications and Documentation

- if a county is applying on behalf of a city in the same county, or
- if a county applicant is applying on behalf of itself and a city in the same county

Section 7060(c) provides that such agreements must be on forms provided by the Department. Contact your CDBG Representative to obtain a copy.

Additional provisions may be added by applicants either by attachments to the agreement or by typing additional provisions or exceptions into the spaces provided on the form. Space has been left between each paragraph for applicants to modify any provisions to fit the applicant's particular situation. The applicant should enter "not applicable" if a provision clearly has no meaning in light of the activities proposed. Do not leave any lines blank.

If the applicant proposes to create a separate Joint Powers agency, the Department must be consulted regarding the inclusion of legal requirements.

PART B. – Required Certifications and Documentation

8. NEPA Environmental Certification.

If the proposed activity will include administration, engineering, architectural, or other related services prior to project implementation, the jurisdiction must prepare a Finding of Exemption before beginning work on any of these services (such services are exempt under Part 58.34 of the Federal environmental regulations pertaining to CDBG recipients). In addition to the Finding of Exemption, the Environmental Form 58.6 must also be prepared for each exempt activity.

The jurisdiction may choose to provide this environmental certification (Finding of Exemption and

Form 58.6) with this application.

If this application is funded, provision of this certification will expedite commencement of service work upon execution of the State contract.

Additional environmental review documents will be needed after contract execution for other phases of project implementation.

Finding of Exemption				
It is the finding of the City/County of that the activities proposed in this application for State Community Development Block Grant funds are exempt from environmental review requirements under NEPA because they are defined as exempt activities in 24 CFR Part 58.34. The activity(ies) judged exempt consist(s) of:				
Brief Description of Activities :	NEPA Citation			
General Administration Activities	58.34 (a) (3)			
1				
2				
3				
Print/Type Name of Authorized Official (per resolution)	Title			
Signature	Date			

U.S. Department of Housing and Urban Development



Pacific/Hawaii Office 450 Golden Gate Avenue San Francisco, California 94102-3448

ACTIVITY DESCRIPTION: General Administration

Level of Environmental Review Determination: _Exempt per 24 CFR 58.34

(Exempt per 24 CFR 58.34, Categorically excluded not subject to statutes per § 58.35(b), Categorically excluded subject to statutes per § 58.35(a), Environmental Assessment per § 58.36, or EIS per 40 CFR 1500)

STATUTES and REGULATIONS listed at 24 CFR 58.6

FLOOD DISASTER PROTECTION ACT

- 1. Does the project involve acquisition, construction or rehabilitation of structures located in a FEMA-identified Special Flood Hazard?
- (**X**) No; Cite Source Document: <u>Exempt General Admin Activities will not impact 100 year flood</u> zones. (This factor is completed).

zones. (This factor is completed).
() Yes; Source Document:
(Proceed).
 2. Is the community participating in the National Insurance Program (or has less than one year passed since FEMA notification of Special Flood Hazards)? () Yes (Flood Insurance under the National Flood Insurance Program must be obtained and maintained for the economic life of the project, in the amount of the total project cost. A copy of the flood insurance policy declaration must be kept on file). () No (Federal assistance may not be used in the Special Flood Hazards Area).
COASTAL BARRIERS RESOURCES ACT 1. Is the project located in a coastal barrier resource area? (X) No; Cite Source Documentation: _There are no Coastal Barrier Resources on West Coast of United States (This element is completed).
() Yes - Federal assistance may not be used in such an area.
AIRPORT RUNWAY CLEAR ZONES AND CLEAR ZONES DISCLOSURES 1. Does the project involve the sale or acquisition of existing property within a Civil Airport's Runway Clear Zone or a Military Installation's Clear Zone?
(X) No; SD <u>Activity does not involve acquisition or sale of property</u> . Project complies with 24 CFR 51.303(a)(3).
() Yes; Disclosure statement must be provided to buyer and a copy of the signed disclosure must be maintained in this Environmental Review Record.
Preparer Signature / Name /Date
Responsible Entity Official Signature / Name / Date

1. Capacity					
 Indicate whether you have any CDBG General, Native American, or Colonias grants for the years 2002, 2003, 2004, or 2005? 					
☐ Yes. What type:	☐ General	□ Colonias	☐ Native Americanl Grants		
Specify which year(s):		_			
		_			
Skip question #2.					
supporting docum	pplication, how wil entation for this p staff only. <i>(Attacl</i>	I you administer the	tinue with question # 2 below. grant? You must attach ion. y statements of staff that will		
• Attach	s a brief descript	t from the program	n operator that administering CDBG		
■ Neighb CDBG this que	oring jurisdiction project are considestion.	dered program ope	usly administered a erators for purposes of		
	ipient agreement	ill be required to el t, as applicable, wi	nter into a contract or th the program		
			es. Describe below. s indicated above.)		

2. LOCAL LEVERAGE FUNDING SOURCES

Please identify other funding sources (local), for <u>all activities</u> included in this application. (To be considered as leverage, funding must be committed.)

Name of CDBG Activity	Use of Funds (for the activity: construction, fees, land acquisition, etc.)	Source of Funds (Applicant's general fund, RDA funds, other local government, etc.) & Specify Resolution #	Funding Type (Loan, grant, in-kind staffing, fee waivers, etc.)	Dollar Amount	Commitment Date	Page # in application
General Admin.	General Admin.			\$		
				\$		
				\$		
				\$		
				\$		
				\$		
				\$		
				\$		
				\$		
				\$		
				\$		
				\$		
			TOTAL	\$		

(shaded area is for HCD use only)

If you are proposing any of the following activities, indicate how many housing units will be assisted:			# of Units:	Per unit leverage:
Housing Rehab. =	Housing Acquisition =			

3. PRIVATE LEVERAGE FUNDING SOURCES Please identify ALL PRIVATE funding sources, for <u>EACH</u> activity in this application. (funding shown will be placed in grant agreement) Commitment Name of CDBG **Use of Funds Source of Funds** Dollar Page # in **Funding Type Date** application **Activity Amount** (Activity delivery the Name of Source) (loan grant in-

	activity)	Include Commitment Letters	kind staffing, discounts, donations, etc.)				
				\$			
				\$			
				\$			
				\$			
				\$			
				\$			
				\$			
				\$			
				\$			
Housing Rehab.	Sweat Equity	Hrs. X	\$10 an hour =	\$			
*Sweat Equity/Lead-Based Paint compliance (see instructions): (check all that apply)							
Homeowners will:	be required to take Work Safe class	1-day	not be allowed to wor any home built prior to	rk on o 1979	not be allowed to lead areas	o work on any	
			TOTAL	\$			

(Shaded area	is for HCD use	only)
leverage:	# of Units:	Per unit leverage:

4. STATE FUNDING AVAILABLE FOR ACTIVITIES (WILL NOT be counted as leverage BUT needed for HUD)

Please identify other funding sources (State), for <u>all activities</u> included in this application.

Name of CDBG Activity	Use of Funds	Source of Funds (Identify Source)	Funding Type (loan, grant, in-kind, fee waivers, etc.)	Dollar Amount	Committed? (yes/no)
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
Total:				\$	

5. FEDERAL FUNDING AVAILABLE FOR ACTIVITIES (WILL NOT be counted as leverage BUT needed for HUD)

Please identify other funding sources (Federal), for all activities included in this application.

Name of CDBG Activity	Use of Funds	Source of Funds (Identify Source)	Funding Type (loan, grant, in-kind, fee waivers, etc.)	Dollar Amount	Committed? (yes/no)
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
Total				\$	

6. Program Income				
Enter the total amount of Program Inco as of June 30, 2006:	\$			
Enter the amount of Program Income the application:	nat has been committed to act	vities in this		
Activities/projects proposed in this application to which Program Income Funds will be added. Identify activities:	Use of Funds (as shown in project's sources a uses)	Dollar Amount Committed (per Resolution) Attach Resolution		
Total Dollar Amount of Program Income activities in this application.	\$			
4. Total Dollar Amount of Non-Committee	\$			
Note: All Program Income that is being committed to activities in this application must be identified in the governing body resolution. In addition, the applicant must ensure that proper citizen participation guidelines were followed.				

ACTIVITY DESCRIPTION FORMS

This year the Department will not be distributing paper copies of the application. The application will be available on our web site and also on CD Rom disks in an electronic format. If for some reason you are not able to access or open an electronic version, then you may make a special request to the Department for a paper copy.

This section of the application contains sets of forms for each of the different eligible activities under the NOFA. Each activity section begins with Instructions on how to complete the activity forms and provide the proper documentation so the activity can be rated and ranked. If the forms are incorrectly completed or if the proper documentation is not included then staff will have to discount the information and no points will be assigned.

Therefore, it is very important that the activity forms are completed thoroughly, accurately, and supporting documentation is provided.

How to proceed:

- Review NOFA and Application Package. Go to application training
 workshops. Select the category of activity you wish to propose. You may apply
 for more than one activity.
- 2. Open the appropriate activity sections of the application on a computer and complete them. Please review the Instructions before filling out any activity forms. Call your CDBG representative if you have any questions.
- 3. Complete all parts of the application. Photocopy additional pages as needed.
- 4. Review the application and Activity Checklist(s) to be sure you have included all the required forms and necessary documentation in this application.
- 5. Have public hearing and approve application with a resolution of the governing body. Submit application by the deadline.